



AMENDMENT TRANSMITTAL LETTER			Docket No. 04305/0204222-US0
Application No. 10/595,403-Conf. #8701	Filing Date June 28, 2006	Examiner G. C. Monikang	Art Unit 2614

Applicant(s): Michael Deruginsky

Invention: MICROPHONE PREAMPLIFIER

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	34	- 33 =	1	x 52.00	52.00
Independent Claims	1	- 3 =	0	x 220.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					52.00

- ☒ Large Entity ☐ Small Entity
- ☐ No additional fee is required for this amendment.
- ☒ Please charge Deposit Account No. 04-0100 in the amount of \$ 52.00.
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-0100
as described below. A duplicate copy of this sheet is enclosed.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.


S. Peter Ludwig
Attorney/Agent Reg. No.: 25,351

Dated: March 18, 2009

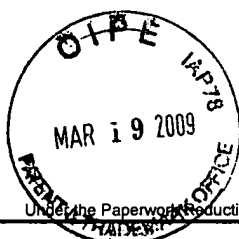
DARBY & DARBY P.C.
P.O. Box 770
Church Street Station
New York, New York 10008-0770
(212) 527-7700

03/23/2009 LLANDRA 00000010 040100 10595403

01 FC:1615

52.00 DA

Express Mail Label No. _____ Dated: _____



FEE TRANSMITTAL For FY 2009		Complete if Known	
		Application Number	10/595,403-Conf. #8701
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	June 28, 2006
		First Named Inventor	Michael Deruginsky
		Examiner Name	G. C. Monikang
TOTAL AMOUNT OF PAYMENT		Art Unit	2614
(\$)		Attorney Docket No.	04305/0204222-US0
52.00			

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 04-0100
	Deposit Account Name: Darby & Darby P.C.
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description						Small Entity	
						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						52	26
Each independent claim over 3 (including Reissues)						220	110
Multiple dependent claims						390	195
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
34 - 33 or HP		1	x 52.00 =	52.00	Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
1 - 3 or HP =		0	x 220.00 =	0.00			
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
- 100 =	/50 =	(round up to a whole number) x		=			
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)						Fees Paid (\$)	
Other (e.g., late filing surcharge)							

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	25,351
Name (Print/Type)	S. Peter Ludwig	Telephone	(212) 527-7700
		Date	March 18, 2009



03-20-09

PCT
P

Application No. (if known): ~~10/554,707~~

Attorney Docket No.: ~~00057/0002546 US0~~

10/595,403

04305/0204222US0

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. in an envelope addressed to:

EM059510088US

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on March 19, 2009
Date

Signature

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee transmittal (1 extra claim) (1 page)

Amendment Transmittal (1 page)

Amendment After Final Rejection (11 pages)

Charge deposit account \$52.00

Postcard

04-0/00